Maine CDC/DHHS Update on Novel Influenza A (H1N1) Virus September 17, 2009

Overview

US CDC reported 1,380 hospitalizations and 196 deaths nationwide between August 30, and September 5, 2009. As of Sept. 6, the World Health Organization reported at least 3,205 deaths from H1N1 and reports of H1N1 from more than 200 countries.

Maine has identified 381 cases of H1N1, which include 19 individuals requiring hospitalization and one individual who has died. There have been no new outbreaks or institutions since the last update. The outbreak at Bowdoin College is ongoing. Of Maine residents with H1N1, 63 percent have been under 25 years of age. The number of cases is only a barometer of community transmission, not of actual case counts, because not all people with infection are tested.

H1N1 influenza vaccine: Licensed health care providers may now register to receive H1N1 vaccine. Information can be found at www.maineflu.gov. H1N1 vaccine is expected to arrive in Maine in mid-October, with a possible small shipment in early October. The distribution of the first few shipments of H1N1 vaccine will be focused on settings where pregnant women are cared for, schools, and hospitals. Eventually sufficient vaccine is expected for everyone.

Seasonal influenza vaccine: Maine CDC has distributed about 49,000 seasonal flu vaccine for children and 55,000 for adults. 11 schools have conducted seasonal flu vaccine clinics this week, and about 116 school districts or schools have registered to offer seasonal flu vaccine clinics.

Maine CDC has posted an updated FAQ for the general public at http://www.maine.gov/dhhs/boh/maineflu/swine-flu-public-faq.shtml.

US CDC released several question and answer documents, including the following topics:

- Guillain-Barré syndrome: http://www.cdc.gov/h1n1flu/vaccination/gbs-qa.htm
- H1N1 vaccine safety: http://www.cdc.gov/h1n1flu/vaccination/vaccine safety qa.htm
- Thimerosal: http://www.cdc.gov/h1n1flu/vaccination/thimerosal_qa.htm

Updates by Priority Population

The following groups are prioritized to be offered the first available doses of H1N1 vaccine, because they are at higher risk of complications from H1N1 infection or are more likely to pass the flu on to others who may be at higher risk of complications:

- Pregnant women;
- Household members and caregivers for children under 6 months old;
- Health care and emergency medical services personnel;
- All people ages 6 months through 24 years of age;
- People ages 25 through 64 who have health conditions.

Pregnant Women:

An increased risk during pregnancy – especially in the second and third trimesters – has been consistently well-documented across several countries. Pregnant women are prioritized for H1N1 vaccine because of this risk, and because they can potentially provide protection to infants who cannot be vaccinated.

Maine CDC is working with clinicians who provide health care for <u>pregnant women</u> to assure they have H1N1 vaccine for their patients and themselves as soon as it arrives in Maine. A conference call for clinicians who care for pregnant women washeld from noon to 1 p.m. Thursday, Sept. 17. Q&As from the call will be posted at www.maineflu.gov soon.

The National Institute of Allergy and Infectious Diseases (NIAID) has begun H1N1 vaccine trials in pregnant women: http://www.nih.gov/news/health/sep2009/niaid-09.htm

Health Care and Emergency Medical Services Personnel:

Maine CDC is working with the Regional Resource Centers at Eastern Maine Medical Center, Central Maine Medical Center, and Maine Medical Center, to assure that <u>all health care providers and Emergency Medical</u> Services personnel (EMS) are offered H1N1 vaccine during the first few weeks of its arrival.

Updated frequently asked questions for health care providers, clinicians, and EMS have been posted at: http://www.maine.gov/dhhs/boh/maineflu/h1n1/provider-faq.shtml

Health care workers and EMS who would like to volunteer to vaccinate children as part of the school-based clinic initiative should register at www.maineresponds.org. Maine Responds will verify the credentials of volunteers, and they will be added to a list at http://www.maine.gov/mema/mema news display.shtml?id=79232.

The Institute of Medicine issued its report to US CDC and OSHA with their recommendations for the use of protective personal equipment (PPE) in clinical settings. Their recommendations confirmed the current US CDC guidance issued in May (http://www.cdc.gov/h1n1flu/guidance/) that N95 respirators be used in clinical settings by health care workers in close contact with those with H1N1 or influenza-like illness. (http://www.iom.edu/CMS/3740/71769/72967.aspx) CDC anticipates that their updated recommendations should be available by or in October. Maine CDC is not planning to issue guidance until after US CDC issues their updated recommendations.

Child Care Providers:

Maine CDC will be holding a conference call for child care providers from noon to 1 p.m., Monday, Sept. 21. The call-in number is 1-800-914-3396, pass code is 473623. Maine CDC has mailed information on H1N1 to all 3,000 licensed early childhood programs in Maine.

School-age Children:

Maine CDC is working with Maine Department of Education (DOE) to assure that <u>all Maine children</u> are offered seasonal (regular) and H1N1 vaccine in local schools.

US CDC released school-located vaccination planning materials and templates (http://www.cdc.gov/h1n1flu/vaccination/slv/). Maine-specific information can be found in our school-based vaccine clinic tool kit: http://www.maine.gov/dhhs/boh/maineflu/schools/index.shtml

A conference call for school personnel and health care providers working on this initiative was held Monday, Sept. 14. The questions and answers from this call, as well as other frequently asked questions, can be found at: http://www.maine.gov/dhhs/boh/maineflu/schools/index.shtml#faq

A list of schools and schools units that have signed up with the Maine Immunization Program to offer vaccine to their students (as of **Monday, Sept. 14**) is posted at http://www.maine.gov/dhhs/boh/maineflu/schools/index.shtml.

People with Health Conditions:

Anyone with asthma is at higher risk for flu-related complications, such as pneumonia. US CDC created a web site with information for people with asthma: http://www.cdc.gov/h1n1flu/asthma.htm?s_tw_flu44

Vaccination

Seasonal Flu Vaccine:

H1N1 has been the focus of attention since the spring, but it is important that we do not forget the risks of the regular seasonal flu. Seasonal flu vaccine has begun to arrive in Maine; US CDC recommends that people at risk for the seasonal flu get vaccinated as soon as it is available:

• Children ages 6 months to 18 years

- Pregnant women
- People 50 years of age and older
- People of any age with certain chronic medical conditions
- People who live in nursing homes and other long-term care facilities
- People who live with or care for those at high risk for complications from flu, including:
 - Health care workers
 - Household contacts of persons at high risk for complications from the flu
 - o Household contacts and out of home caregivers of children younger than 6 months old

H1N1 Vaccine:

The FDA has approved the H1N1 vaccine. The vaccines will be distributed nationally after the initial lots become available, which is expected within the next four weeks.

http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm182399.htm.

Early results from clinical trials indicate that adults age 18 and older may need only one dose of H1N1 vaccine. http://www.hhs.gov/news/press/2009pres/09/20090911a.html

Vaccine planning with communities and schools is well underway to ensure that all Maine children, all health care providers and Emergency Medical Services personnel, pregnant women, and others in high-risk groups for H1N1 are offered H1N1 vaccine as soon as it arrives in Maine.

Vaccine Coordinators:

Vaccine Coordinators have been appointed for each Public Health District in Maine. Vaccine Coordinators will be one component of district leadership teams, which also include staff from the three Regional Resource Centers for Public Health Emergency Preparedness and Emergency Management Agencies.

Vaccine Coordinators:

District 1 – York: Sharon Leahy-Lind, 490-4625

District 2 – Cumberland: Meredith Tipton, 592-5631

District 3 – Western Maine: MaryAnn Amrich, 753-9103

(Franklin, Oxford, and Androscoggin counties)

District 4 – Mid Coast: Jen Gunderman-King, 596-4278

(Waldo, Knox, Lincoln, and Sagadahoc counties)

District 5 – Central Maine: Sue Lee, 592-5634

(Somerset and Kennebec counties)

District 6 – Penquis: Jessica Fogg, 592-5633

(Penobscot and Piscataguis counties)

District 7 – Downeast: Al May, 263-4975

(Washington and Hancock counties)

District 8 – Aroostook: Stacy Boucher, starting Sept. 21, Sharon Ramey in the interim, 592-5632

Tribal Vaccine Coordinator: Jerolyn Ireland, 532-2240, Ext. 15

Good Health Habits Can Help Stop Germs

Prevention of H1N1 is most important, especially now that the virus is widespread in many parts of Maine. Covering coughs and sneezes with a tissue or sleeve, washing hands frequently, and staying home if ill with a fever are shared responsibilities of everyone in Maine, especially to protect people who are at higher risk for complications from H1N1.

Guidance for Businesses

The Department of Homeland Security issued a guide for businesses to prepare for H1N1 (http://www.flu.gov/professional/business/smallbiz.html) including the following tips:

- 1. **Develop policies** that encourage ill workers to stay at home without fear of any reprisals.
- 2. Develop other flexible policies to allow workers to telework (if feasible) and create other leave policies to allow workers to stay home to care for sick family members or care for children if schools close.
- 3. **Provide resources and a work environment that promotes personal hygiene.** For example, provide tissues, no-touch trash cans, hand soap, hand sanitizer, disinfectants and disposable towels for workers to clean their work surfaces.
- 4. **Provide education and training materials** in an easy to understand format and in the appropriate language and literacy level for all employees. See www.cdc.gov/hln1flu/business.
- 5. Instruct employees who are well but who have an ill family member at home with the flu that they can go to work as usual. These employees should monitor their health every day, and notify their supervisor and stay home if they become ill. Employees who have a certain underlying medical condition or who are pregnant should promptly call their health care provider for advice if they become ill.
- 6. **Encourage workers to obtain a seasonal influenza vaccine**, if it is appropriate for them according to CDC recommendations (http://www.cdc.gov/flu/protect/keyfacts.htm). This helps to prevent illness from seasonal influenza strains that may circulate at the same time as the 2009 H1N1 flu.
- 7. Encourage employees to get the 2009 H1N1 vaccine when it becomes available if they are in a priority group according to CDC recommendations. For information on groups recommended for seasonal and H1N1 vaccines, please see www.flu.gov. Consider granting employees time off from work to get vaccinated when the vaccine is available in your community.
- 8. **Provide workers with up-to-date information on influenza risk factors**, protective behaviors, and instruction on proper behaviors (for example, cough etiquette; avoid touching eyes, nose and mouth; and hand hygiene).
- 9. Plan to implement practices to minimize face-to-face contact between workers if advised by the local health department. Consider the use of such strategies as extended use of e-mail, websites and teleconferences, encouraging flexible work arrangements (for example, telecommuting or flexible work hours) to reduce the number of workers who must be at the work site at the same time or in one specific location.
- 10. **If an employee does become sick while at work**, place the employee in a separate room or area until they can go home, away from other workers. If the employee needs to go into a common area prior to leaving, he or she should cover coughs/sneezes with a tissue or wear a facemask if available and tolerable. Ask the employee to go home as soon as possible.

Other New or Recently Updated H1N1 Guidance or News

The Spanish language version of the US CDC brochure "Take 3 To Fight Flu" is now posted on the CDC website at http://www.cdc.gov/flu/freeresources/print.htm

US CDC issued a Q&A on reporting influenza and pneumonia-related hospitalizations and deaths: http://www.cdc.gov/h1n1flu/reportingqa.htm

How to Stay Updated

Weekly Updates: Check the Thursday morning updates on H1N1 in Maine on Maine CDC's H1N1 website. Now available as an RSS feed (midway down the center of the homepage): http://www.maineflu.gov/

Health Alert Network: Sign up to receive urgent updates from Maine CDC's Health Alert Network (HAN). The easiest and quickest way is to sign up is through the HAN Alert RSS feed at www.mainepublichealth.gov (midway down the center of the homepage).

Follow Maine CDC's Updates:

- Facebook (search for "Maine CDC")
- Twitter (http://twitter.com/MEPublicHealth)
- MySpace (<u>www.myspace.com/mainepublichealth</u>)
- Maine CDC's Blog (http://mainepublichealth.blogspot.com)

H1N1 Conference Calls: Maine CDC will be holding conference calls on a variety of topics related to H1N1 over the coming weeks. Upcoming calls:

Date	Time	Topic	Call-in Information
Monday, Sept.	Noon to 1	Child Care Providers	1-800-914-3396
21	p.m.		
			pass code: 473623

Consider Calling or Emailing Us:

- For clinical consultation, outbreak management guidance, and reporting of an outbreak of H1N1 call Maine CDC's toll free 24-hour phone line at: 1-800-821-5821.
- General Public Call-in Number for Questions: 1-888-257-0990
 NextTalk (deaf/hard of hearing) (207) 629-5751
 Monday Friday 9 a.m. 5 p.m.
- Email your questions to: <u>flu.questions@maine.gov</u>

U.S. CDC H1N1 Recommendations and Guidance:

http://www.cdc.gov/h1n1flu/ and http://www.flu.gov/

Maine Weekly Influenza Surveillance Report

Maine Center for Disease
Control and Prevention
An Office of the
Department of Health and Human Services

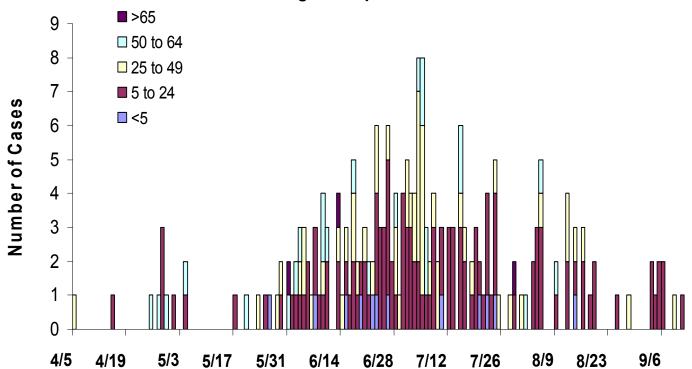
September 16, 2009

- 381 confirmed and probable cases of H1N1 total to date
 - o 227 in Maine residents
 - 14 Maine residents have been hospitalized
 - o 154 in out of state residents tested in Maine
 - 5 Out of state residents have been hospitalized in Maine
- 1 death reported to date
- 91% of lab confirmed H1N1 cases in Maine residents and out of state visitors are under the age of 50 (range 0-81 years, mean of 22 years)

Characteristics of Lab Confirmed H1N1 Influenza Cases - Maine Residents, 2009

Age		Gender		At Risk		Hospital Care				Deaths		
Age group	N	%	Male	Female	HCW	Pregnant	Hospitalized	%	ICU	Ventilated	Z	%
<5	12	5	8	4	0	0	1	8	0	0	0	0
5 to 24	132	58	64	68	4	0	3	2	0	1	0	0
25 to 49	57	25	25	32	11	1	5	9	1	1	0	0
50 to 64	24	11	13	11	5	0	4	17	2	2	1	4.2
>65	2	1	0	2	0	0	1	50	0	0	0	0
Total	227	~	110 (48%)	117 (52%)	20	1	14	6	3	4	1	0.4

Confirmed Cases of H1N1 Influenza in Maine Residents, by Onset Date and Age Group 09/16/2009



Lab confirmed H1N1 Influenza Cases by County – Maine Residents and Out of State Visitors, 2009

County	Maine Residents	Out of State	Total	
Androscoggin	18	8	26	
Aroostook	0	0	0	
Cumberland	98	62	160	
Franklin	0	0	0	
Hancock	4	2	6	
Kennebec	17	37	54	
Knox	3	8	11	
Lincoln	8	4	12	
Oxford	8	8	16	
Penobscot	16	4	20	
Piscataquis	0	0	0	
Sagadahoc	9	0	9	
Somerset	1	2	3	
Waldo	1	1	2	
Washington	1	0	1	
York	43	18	61	
Total	227	154	381	

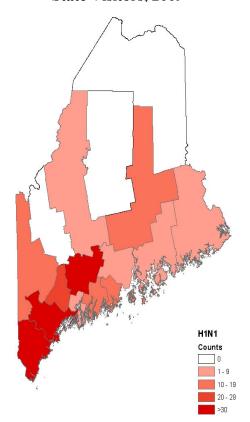
Out of state cases are classified by the area in which they are staying (if a summer resident/camper) or the area in which they were tested

Institutional Settings with Lab Confirmed H1N1, by Count - Maine, 2009

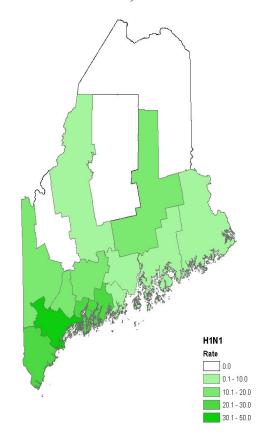
County	School/Day Care	Acute Care	Cong. Living	Camp
Androscoggin	1	0	0	6
Aroostook	0	0	0	0
Cumberland	1	0	2	14
Franklin	0	0	0	0
Hancock	0	0	0	0
Kennebec	0	0	0	9
Knox	0	0	0	4
Lincoln	0	0	0	1
Oxford	0	0	0	3
Penobscot	0	0	0	0
Piscataquis	0	0	0	0
Sagadahoc	0	0	0	0
Somerset	0	0	0	1
Waldo	0	0	1	0
Washington	0	0	0	0
York	0	1	0	2
Total	2	1	3	40

Lab Confirmed H1N1, by County

– Maine Residents and Out of
State Visitors, 2009

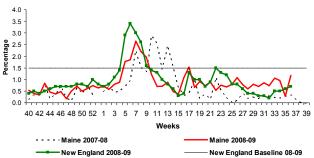


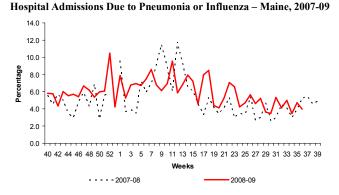
Rate of Lab Confirmed H1N1 Infection per 100,000 People, by County - Maine Residents, 2009



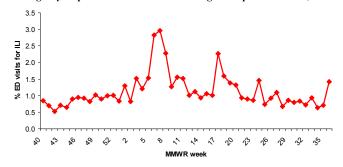
Surveillance Information

Outpatient Visits for Influenza-like Illness – Maine, 2007-09

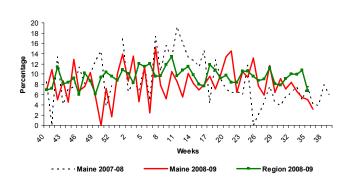




Emergency Department Visits for ILI at Eight Hospitals - Maine, 2009



Percentage of Deaths Attributable to Pneumonia or Influenza – Maine,



Lab Data

- 4,031 influenza tests have been performed since April 27, 2009
 - o 9.1% of tests have been positive for H1N1

Respiratory Specimens Positive for Influenza from HETL – Maine, 2007-

